

- **Where**—(Specify the location of the event or where materials will be distributed – e.g., at a local organization, sports event, school, etc.)
- **When**—(Specify the dates from/to that the VERB logo will be used.)
- **Involvement**—(Identify 1- other partner entities and sponsors that will be involved and 2- sources of external funding. Specifically note if other corporate or non-profit logos will be used with the VERB logo.)

Specify Electronic Color and Format the Logo Needs to be in (if there is one)—otherwise, the logo will be provided in both a color and a black-and-white .jpeg format.

VERB™ LOGO USE AGREEMENT FORM

Agreement

I have read and understand the VERB™ Brand Logo Usage Terms and Conditions for Non-profit Organizations and Agencies. I agree to follow these Terms and Conditions and will only use the logo for the activity(ies) and dates provided in the "Description of Request to Use the VERB Logo." To use the logo for additional purposes/activities or dates, I will submit another "Agreement" form. I recognize that by signing below, I am responsible for safeguarding the use of the VERB logo and will not allow it to be used by others. I also agree to provide the Centers for Disease Control and Prevention (CDC) with feedback on our activities and experiences with the VERB Campaign.

The CDC, at its sole discretion, may disapprove or rescind its approval of any use that fails to comply with these Terms and Conditions. CDC approval of a request to use the VERB™ logo and tagline does not constitute an endorsement of any private product or service, and does not create any right, benefit, or interest against the United States.

Name/Title: _____

Organization: _____

Phone Number: _____

Signed: _____ **Date:** _____

E-mail to: youthcampaign@cdc.gov , attention: Anna Green
OR

Fax to: Anna Green, VERB Partnership Team, 770-488-5962

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CDC Use Only

CHECK ONE:

LOGO USE REPORT/REQUEST AND AGREEMENT FORMS WERE RECEIVED:

___ by email from requester named on the agreement form

___ by: fax

Reviewer(s)

(CIRCLE ONE:)

1) Approved 2) Approved with Specified Changes 3) Disapproved

Specified Changes, if any:

Reviewer: _____

Date: _____

Date Logos Sent: _____